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TYPE **SMALL ENTITY ISSUE FEE PUBLICATION FEE** DATE DUE nonprovisional YES \$650 \$0 11/26/2003 \$1330 **EXAMINER** ART UNIT **CLASS-SUBCLASS** CRANSON JR, JAMES W 2875 362-027000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the I SILICON VALLEY PATENT GROUPLEP names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single $\hfill \Box$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. 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